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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/814,319	03/31/2004	Xinhua Gu	IMRAA.025A	5170
20995 KNOBBE MA	7590 05/06/200 RTENS OLSON & BE	EXAM	EXAMINER	
2040 MAIN S	TREET	VAN ROY, TOD THOMAS		
FOURTEENTH FLOOR IRVINE, CA 92614			ART UNIT	PAPER NUMBER
,		2828		
			NOTIFICATION DATE	DELIVERY MODE
			05/06/2008	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

jcartee@kmob.com eOAPilot@kmob.com

Interview Summary

 Application No.
 Applicant(s)

 10/814,319
 GU ET AL.

 Examiner
 Art Unit

 TOD T. VAN ROY
 2828

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711 participanto (applicant, applicant o representative, i Te	personnery.
(1) <u>TOD T. VAN ROY</u> .	(3)Don Svetkoff.
(2) <u>Xinhua Gu</u> .	(4) <u>Mark Gallagher</u> .
Date of Interview: 29 April 2008.	
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal (copy given to: 1)□ applicant	2) applicant's representative]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.
Claim(s) discussed: 1.	
Identification of prior art discussed: <u>Lin and Price</u> .	
Agreement with respect to the claims f) was reached.	g) was not reached. h) N/A.
Substance of Interview including description of the generached, or any other comments: <u>The Applicant's and the if the variable attenuator were to be placed external to the state of the placed external to the state of the placed external to the state of the state o</u>	Examiner discussed the significant change to Lin's system
(A fuller description, if necessary, and a copy of the amen allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached	
GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER	ie last Office action has already been filed, APPLICANT IS R OF ONE MONTH OR THIRTY DAYS FROM THIS TERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO
	/Minsun Harvey/
Examiner Note: You must sign this form unless it is an	Examiner's signature, if required